

FACT SHEET

☐ CALL BACK

☐ LETTER/STATUS

DATE: _____

TAKEN BY: _____ UNIT: _____

FIELD OFFICE VISITED: _____

TELEPHONE #: _____ REFERENCE: _____

CALLER'S NAME: _____

CUSTOMER'S NAME: _____

ADDRESS: _____

CITY, STATE, ZIP CODE: _____

D/L#: _____ DOB: _____ SEX: _____ LICENSE PLATE#: _____

ACTION REQUESTED: _____

REASON: _____

RESPONSE/RESULTS: _____

CALLBACK DATE/TIME: _____ CALLBACK DATE/TIME: _____